

By the Committee on Governmental Oversight and Accountability;  
and Senator Bean

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1 A bill to be entitled

2 An act relating to pediatric cardiac care in the  
3 Children's Medical Services program; creating s.  
4 391.224, F.S.; providing legislative findings and  
5 intent; creating the Pediatric Cardiac Care Advisory  
6 Council within the Department of Health; specifying  
7 the council membership; providing for election of the  
8 council chair and vice chair; providing for per diem  
9 and travel expenses; specifying the duties of the  
10 council; requiring the State Surgeon General to  
11 designate certain facilities as Pediatric and  
12 Congenital Cardiovascular Centers of Excellence;  
13 establishing prerequisites for the designation of a  
14 facility as a center of excellence; requiring that the  
15 council provide an annual report to the Governor, the  
16 Legislature, and the State Surgeon General; requiring  
17 the department to develop rules relating to pediatric  
18 cardiac care and facilities in the program;  
19 authorizing the department to adopt rules relating to  
20 the council and the designation of facilities as  
21 Pediatric and Congenital Cardiovascular Centers of  
22 Excellence; providing an effective date.

23  
24 Be It Enacted by the Legislature of the State of Florida:

25  
26 Section 1. Section 391.224, Florida Statutes, is created to  
27 read:

28 391.224 Pediatric Cardiac Care Advisory Council.—

29 (1) LEGISLATIVE FINDINGS AND INTENT.—The Legislature finds  
30 significant benefits in the continued coordination of the  
31 activities of state agencies regarding the delivery of pediatric

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32 cardiac care in this state. It is the intent of the Legislature  
33 that the Department of Health and its cardiac consultants and  
34 the Agency for Health Care Administration maintain their long-  
35 standing interagency teams and agreements to support the  
36 coordinated development and adoption of guidelines, standards,  
37 and rules under the agencies' existing statutory authority for  
38 the state pediatric cardiac care system to ensure the necessary  
39 continuum of care for pediatric cardiac patients. The  
40 Legislature also intends that the department take the lead in  
41 this process.

42 (2) ESTABLISHMENT OF PEDIATRIC CARDIAC CARE ADVISORY  
43 COUNCIL.—The Pediatric Cardiac Care Advisory Council, an  
44 advisory council as defined in s. 20.03, is created within the  
45 department to advise it on the delivery of all types of cardiac  
46 care to children and adults with congenital heart disease. The  
47 council is subject to s. 20.052.

48 (a) The council shall be composed of no more than 15 voting  
49 members with technical expertise in cardiac medicine, appointed  
50 by the State Surgeon General for staggered terms of 4 years. The  
51 State Surgeon General may appoint an alternate member for each  
52 voting member. An alternate member may participate in council  
53 discussions and subcommittees but is eligible to vote only in  
54 those instances when the voting member for whom he or she is the  
55 alternate cannot cast a vote. An employee of the department or a  
56 contracted consultant paid by the department may not serve as an  
57 appointed or ex officio member of the council. Council  
58 membership must include the following voting members:

59 1. Pediatric cardiologists or pediatric cardiovascular  
60 surgeons nominated by the chief executive officers of the

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61 following hospitals:

62 a. Johns Hopkins All Children's Hospital in St. Petersburg.

63 b. Arnold Palmer Hospital for Children in Orlando.

64 c. Joe DiMaggio Children's Hospital in Hollywood.

65 d. Nicklaus Children's Hospital in Miami.

66 e. St. Joseph's Children's Hospital in Tampa.

67 f. University of Florida Health Shands Hospital in  
68 Gainesville.

69 g. University of Miami Holtz Children's Hospital in Miami.

70 h. Wolfson Children's Hospital in Jacksonville.

71 i. Florida Hospital for Children in Orlando.

72 j. Nemours Children's Hospital in Orlando.

73 2. Pediatric cardiologists or pediatric cardiovascular  
74 surgeons nominated by the chief executive officer of a hospital  
75 that holds a current certificate of need for a pediatric cardiac  
76 program and that meets state and national standards as  
77 recommended by the council following an onsite visit by a panel  
78 from the council.

79 3. Two physicians who are pediatric cardiologists or  
80 subspecialists with expertise in congenital heart disease; who  
81 are not associated with a facility otherwise represented by a  
82 voting member of the council; and who are appointed in  
83 consultation with the Deputy Secretary for Children's Medical  
84 Services and the Director of Children's Medical Services.

85 4. A community physician who has ongoing involvement with  
86 and special interest in the treatment of children with heart  
87 disease and who is not associated with a facility represented in  
88 the membership of the council pursuant to subparagraph 1. or  
89 subparagraph 2. or a community-based medical internist who has

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90 experience in treating adults with congenital heart disease.  
91 Appointment of a community physician shall be made in  
92 consultation with the Deputy Secretary for Children's Medical  
93 Services and the Director of Children's Medical Services.

94 5. Appointments made under subparagraphs 1. and 2. are  
95 contingent on the nominating hospital's maintenance of pediatric  
96 certificates of need and the hospital's compliance with the  
97 state and national standards identified by the council in  
98 exercising its duties under subparagraph (f)5. A member whose  
99 hospital fails to maintain such certificates or comply with such  
100 standards during his or her term, as determined by the State  
101 Surgeon General, may serve only in an advisory capacity as a  
102 nonvoting member until such time as the maintenance of such  
103 certificates and compliance with such standards are restored.

104 (b) The State Surgeon General may appoint nonvoting,  
105 advisory members to the council in consultation with the Deputy  
106 Secretary for Children's Medical Services and the Director of  
107 Children's Medical Services. Such members may participate in  
108 council discussions and subcommittees created by the council.

109 (c) The chair and vice chair of the council shall be  
110 elected by the council members to 2-year terms and may not serve  
111 more than 2 consecutive terms.

112 (d) The council shall meet upon the call of the chair or  
113 two or more voting members or upon the call of the State Surgeon  
114 General, but must meet at least quarterly. Council meetings must  
115 be conducted by teleconference or through other electronic means  
116 when feasible.

117 (e) Council members shall serve without compensation, but  
118 are entitled to reimbursement for per diem and travel expenses

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119 in accordance with s. 112.061.

120 (f) The duties of the council include, but are not limited  
121 to:

122 1. Recommending standards for personnel, clinics, and  
123 facilities that provide cardiac services to clients of the  
124 department and the program and for the diagnosis of cardiac  
125 conditions.

126 2. Analyzing reports on the periodic review of cardiac care  
127 personnel, clinics, facilities, and diagnoses to determine if  
128 established state and national standards for cardiac services  
129 are being met.

130 3. Making recommendations to the Director of Children's  
131 Medical Services regarding determinations of whether reviewed  
132 cardiac care personnel, clinics, facilities, and diagnoses meet  
133 established state and national standards for cardiac services.

134 4. Making recommendations to the Director of Children's  
135 Medical Services regarding the intervals for reinspection of  
136 cardiac care personnel, clinics, facilities, and diagnoses  
137 meeting established state and national standards for cardiac  
138 services.

139 5. Reviewing and inspecting a hospital upon the request of  
140 the hospital, the department, or the Agency for Health Care  
141 Administration to analyze its compliance with established state  
142 and national standards for cardiac services.

143 6. Advising the department and the Agency for Health Care  
144 Administration on all aspects of the provision of cardiac care  
145 under the program, including rulemaking, and on all components  
146 of providing care to adults and children with congenital heart  
147 disease and children with acquired heart disease.

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148 7. Reviewing and analyzing compliance by cardiac care  
149 personnel, clinics, and facilities with the recognized state and  
150 national professional standards of care for children with heart  
151 disease.

152 8. Making recommendations to the State Surgeon General for  
153 legislation regarding and appropriations for pediatric cardiac  
154 services.

155 9. Providing advisory opinions to the Agency for Health  
156 Care Administration before the agency approves a certificate of  
157 need for pediatric cardiac services.

158 (3) DESIGNATION OF PEDIATRIC AND CONGENITAL CARDIOVASCULAR  
159 CENTERS OF EXCELLENCE.—Upon the recommendation of the council  
160 and the Director of Children’s Medical Services, the State  
161 Surgeon General shall designate facilities that the council  
162 recommends have met state and national professional standards of  
163 care for children with heart disease as Pediatric and Congenital  
164 Cardiovascular Centers of Excellence. The council shall  
165 recommend measurable performance standards and evaluation tools  
166 to be used in determining whether a facility qualifies for such  
167 designation. The designation of a facility as a center of  
168 excellence is automatically withdrawn if the facility no longer  
169 meets, as determined by the State Surgeon General, the  
170 performance standards that qualified it for such designation.

171 (4) ANNUAL REPORT.—Beginning in January 1, 2019, and by  
172 each January 1 thereafter, the council shall submit an annual  
173 report to the Governor, the President of the Senate, the Speaker  
174 of the House of Representatives, and the State Surgeon General.  
175 The report must summarize the council’s activities during the  
176 preceding fiscal year and include data and performance measures

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177 on surgical morbidity and mortality for all the pediatric  
178 cardiac facilities that participated in the program. The report  
179 must also recommend any policy or procedural changes that would  
180 increase the council's effectiveness in monitoring the  
181 performance of such facilities.

182 (5) RULEMAKING.—

183 (a) The department, in coordination with the Agency for  
184 Health Care Administration, shall develop rules related to  
185 pediatric cardiac care and facilities that participate in the  
186 program. The rules shall establish standards relating to the  
187 training and credentialing of medical and surgical personnel,  
188 minimum case volumes for facilities and physicians, and data  
189 reporting requirements for monitoring and enhancing quality  
190 assurance. The rules shall meet or exceed the standard of care  
191 provided in Children's Medical Services Pediatric Cardiac  
192 Facilities Standards established in October 2012.

193 (b) The department may also adopt rules relating to the  
194 establishment, operation, and authority of the council and the  
195 process, performance standards, and evaluation tools for  
196 designating facilities as Pediatric and Congenital  
197 Cardiovascular Centers of Excellence.

198 Section 2. This act shall take effect upon becoming a law.